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Fill in this information to identify you	ur case:	
United States Bankruptcy Court for	the:	
Eastern District of Pen	nsylvania	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Myranda	
	Write the name that is on your government-issued picture	First name	First name
	identification (for example, your driver's license or passport).	Middle name	Middle name
		Yoblick	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have		
	used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>2</u> <u>3</u> <u>4</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor	^r 1 Myranda		Yoblick	Case numb	per (if known)
	First Name	Middle Name	Last Name	_	,
		About Debtor 1:		About Debtor 2 (S	pouse Only in a Joint Case):
	Our Employer Identification Jumber (EIN), if any.			 EIN	
				 EIN	
5. V	Where you live			If Debtor 2 lives at	a different address:
		1824 Meribrook F Number Street	Road	Number Stree	et
		Philadelphia, PA			
		City Philadelphia	State ZIP Code	City	State ZIP Code
		County		County	
		If your mailing addre fill it in here. Note the you at this mailing ad	ess is different from the one abo at the court will send any notices ddress.	to If Debtor 2's mailing to it in here. Note that at this mailing add	ng address is different from yours, fill the court will send any notices to you ress.
		Number Street		Number Stree	ot .
		P.O. Box		P.O. Box	
		City	State ZIP Code	City	State ZIP Code
	Why you are choosing <i>this</i> Iistrict to file for bankruptcy	Check one:		Check one:	
u	istrict to the for bank upicy	Over the last 180 have lived in this district.	days before filing this petition, I district longer than in any other	Over the last 1 have lived in the district.	180 days before filing this petition, I his district longer than in any other
		I have another re (See 28 U.S.C. §	eason. Explain. § 1408)	I have another (See 28 U.S.C	reason. Explain. c. § 1408)

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Yoblick

Debt	or 1 Myranda	Yoblick	Case number (if known)
	First Name	Middle Name Last Name	
Part	2: Tell the Court About Yo	ur Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you are choosing to file under		on of each, see <i>Notice Required by 11 U.S.C.</i> § 342(b) for Individuals Filing for go to the top of page 1 and check the appropriate box.
8.	How you will pay the fee	details about how you may perfect, or money order. If you a credit card or check with a least to Pay The Filing Fee in Instance to Pay The Filing Fee was judge may, but is not require official poverty line that apple	allments. If you choose this option, sign and attach the <i>Application for Individuals tallments</i> (Official Form 103A). ived (You may request this option only if you are filing for Chapter 7. By law, a and to, waive your fee, and may do so only if your income is less than 150% of the lies to your family size and you are unable to pay the fee in installments). If you till ill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form
	Have you filed for bankruptcy within the last 8 years?	✓ No. ☐ Yes. District District District	When Case number MM / DD / YYYY When Case number MM / DD / YYYY When Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. ☐ Yes. Debtor District Debtor District	Relationship to you When Case number, if known MM / DD / YYYY Relationship to you When Case number, if known MM / DD / YYYY
11.	Do you rent your residence?	No. Go to line 12.	ained an eviction judgment against you? Statement About an Eviction Judgment Against You (Form 101A) and file it kruptcy petition.

Debtor 1

Myranda

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Deb	tor 1 Myranda	Yoblick			Case number (if known)			
	First Name	Middle Name	Last Name					
Par	t 3: Report About Any Busin	nesses You Owr	n as a Sole Proprietor					
12.	Are you a sole proprietor of	☑ No. Go to Pa	art 4.					
	any full- or part-time business?	Yes. Name a	and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole	Number	Street					
	proprietorship, use a separate sheet and attach it to this							
	petition.	City		State	ZIP Code			
		Check the ap	opropriate box to describe you	r business:				
		Health C	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
		☐ Single A	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
☐ Stockbroker (as defined			oker (as defined in 11 U.S.C. §	101(53A))				
		☐ Commod	dity Broker (as defined in 11 U.	S.C. § 101(6))				
		☐ None of the above						
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor, you m sheet, statement of operations, cash-flow statement, and federal income tax reture exist, follow the procedure in 11 U.S.C. § 1116(1)(B).					s debtor, you must attach your most recent balance			
	For a definition of small business	☑ No. I am	not filing under Chapter 11.					
	debtor, see 11 U.S.C. § 101(51D).		filing under Chapter 11, but I a	am NOT a small bu	usiness debtor according to the definition in the			
					ebtor according to the definition in the der Subchapter V of Chapter 11.			
			i filing under Chapter 11, I am a kruptcy Code, and I choose to		ebtor according to the definition in the bchapter V of Chapter 11.			

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Debt	or 1	Myranda	Yoblick			Case number (if known)				
		First Name	Middle Nam	e Last Name			, ,			
Pari	t 4: Report	t if You Own or Ha	ave Any H	azardous Property or	Any Prope	erty That Needs Im	mediate Attention			
14.	Do you owr	n or have any	☑ No.							
	property that poses or is alleged to pose a threat of	☐ Yes.	What is the hazard?							
imminent a		t and identifiable	inent and identifiable ird to public health or							
	safety? Or do you property that need	do you own any at needs immediate								
	attention?			If immediate attention is i	needed, why	is it needed?				
	perishable g	e, do you own loods, or livestock								
		e fed, or a building orgent repairs?								
				Where is the property?						
					Number	Street				
					City		State	ZIP Code		

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Debtor 1	Myranda		Yoblick	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Myranda First Name		Myranda	Yoblick			Case number (if known)				
		Middle N	liddle Name Last Name							
Par	t 6: Answer	These Questions	s for R	eporting Purposes						
16. What kind of debts do you have?			16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.						
			16b.			s debts? Business debts are de rough the operation of the busine				
			16c.	State the type of debts you ow	ve th	at are not consumer debts or bu	siness d	ebts.		
17.	Are you filin	g under Chapter 7?		No. I am not filing under Cha						
Po you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?										
18.	How many c estimate tha	reditors do you t you owe?			1,000-5,000					
19.	How much d	o you estimate you worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	liabilities to			\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Par	t 7: Sign Be	Plow								
For	For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,									
		and 3571		ında Yoblick	-1		,	30 - 7		
		· -		oblick, Debtor 1		<u></u>				
	Executed on									

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Debtor 1	Myranda	Yoblick	Case number (if known)
	First Name	Middle Name Last Name	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file page.		proceed under Chapter 7, 11, 12, or each chapter for which the person is 11 U.S.C. § 342(b) and, in a case in v	d in this petition, declare that I have informed the debtor(s) about eligibility to 13 of title 11, United States Code, and have explained the relief available under eligible. I also certify that I have delivered to the debtor(s) the notice required by which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry filed with the petition is incorrect.
		X /s/ Michael A. Cibik	Data 02/24/2025
		Signature of Attorney for Debtor	Date <u>03/31/2025</u>
		Michael A. Cibik Printed name Cibik Law, P.C. Firm name 1500 Walnut Street Suite 96 Number Street	00
		Philadelphia	PA 19102
		City	State ZIP Code
		Contact phone (215) 735-1060	Email address cibik@cibiklaw.com
		23110	PA
		Bar number	State

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			Document	Pa	<u>ae 9 of</u>	47			
is informa	ation to identify y	our case and this	filing:						
1	Myranda		Yoblicl	(
	First Name	Middle Name							
2									
, if filing)	First Name	Middle Name	Last Nan	ne					
States Ban	kruptcy Court for t	he: Eas	t ern D	strict of	Pennsylv	/ania			
umber			_	_					Check if this is an
								_	amended filing
al Earn	n 1061/R								
eaule	e A/B: Pr	operty							12/15
gory whe	ere you think it f ble for supplyin	its best. Be as c g correct inform	omplete and ac ation. If more s	curate a	as possible needed, at	e. If two ma ttach a sep	rried people ar	e filing	together, both are
1: De	escribe Each	Residence, Bu	ilding, Land,	or Othe	er Real Es	state You	Own or Have	an Int	erest In
Do you ow	vn or have any leg	gal or equitable int	erest in any resid	ence, bu	ilding, land	, or similar p	property?		
√ No. Go	to Part 2.		•						
Yes. W	here is the propert	y?							
			-					→ [_	\$0.00
2: De	escribe Your \	/ehicles							
	. •	•	•				•		
Cars, vans	s, trucks, tractors	, sport utility vehic	les, motorcycles						
			•						
Watercraft	t, aircraft, motor h	nomes, ATVs and c	ther recreational	vehicles	, other vehi	cles, and ac	cessories		
	Boats, trailers, mo	otors, personal water	rcraft, fishing vess	els, snow	mobiles, mo	torcycle acce	ssories		
_									
☐ Yes									
			-				tries for pages	→ [_	\$0.00
3: De	escribe Your F	Personal and F	lousehold Ite	ms					
	2 2, if filing) States Ban umber al Forr category, gory whe responsil al pages, 1: De Do you ov 1 No. Go Yes. W Add the d you have : 1 No Yes Watercraft Examples: 1 No Yes Add the d you have : 1 No Yes	Myranda First Name 2 2, if filing) States Bankruptcy Court for the states Bankruptcy Court f	Add the dollar value of the portion you own for you have attached for Part 1. Write that number Myranda First Name Middle Name	Myranda Yoblick First Name Middle Name Last Name This filling: This filling: This filling: This filling: This filling: First Name Middle Name Last Name States Bankruptcy Court for the: Eastern Discrete Base Base Base Base Base Base Base Bas	In information to identify your case and this filing: Myranda	Is information to identify your case and this filling: Myranda	Myranda Yoblick First Name Middle Name Last Name Pennsylvania First Name Middle Name Last Name	Is information to identify your case and this filling: Myranda	Is information to identify your case and this filing: 1

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Do you own or have any legal or equitable interest in any of the following items?

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6.	Household goods and fu	rnishings							
	-	ces, furniture, linens, china, kitchenware							
	☐ No								
	☑ Yes. Describe	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$300.00						
7.	Electronics								
	Examples: Televisions an	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ectronic devices including cell phones, cameras, media players, games							
	☐ No								
	✓ Yes. Describe	Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$300.00						
8.	Collectibles of value								
		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or collections; other collections, memorabilia, collectibles							
	☑ No	☑ No							
	Yes. Describe								
9.		d hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and ntry tools; musical instruments							
	✓ No ☐ Yes. Describe								
10.	Firearms Examples: Pistols, rifles,	shotguns, ammunition, and related equipment							
	✓ No ☐ Yes. Describe								
11.	Clothes Examples: Everyday cloth	nes, furs, leather coats, designer wear, shoes, accessories							
	□ No								
	✓ Yes. Describe	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$150.00						
12.	Jewelry Examples: Everyday jewes silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,							
	☐ No								
	✓ Yes. Describe	Various used pieces of jewelry.	\$200.00						
13.	Non-farm animals Examples: Dogs, cats, bir	rds, horses							
	☑ No								
	Ves Describe								

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14.	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	
	Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$950.00
Pa	rt 4: Describe Your Financial Assets	
Do y	ou own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	☑ No	
	☐ Yes	
17.	Deposits of money	
	Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
	☐ No	
	✓ Yes Institution name:	
	Santander	
	17.1. Checking account: Account Number: 5822	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks	
	Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	☑ No	
	☐ Yes	
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture	
	☑ No	
	Yes. Give specific information about them	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments	
۷٠.	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	No	
	☐ Yes. Give specific	
	information about	

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21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	✓ No	
	Yes. List each	
	account separately.	
22.	Security deposits and prepayments	
	Your share of all unused deposits you have made so that you may continue service or use from a company	
	Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
	☑ No	
	☐ Yes	
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
	☑ No	
	☐ Yes	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.	
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	☑ No	
	☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property	
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mone	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	

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	☑ No
	☐ Yes. Give specific information about
	them, including whether you already filed the returns and
	the tax years
20	Family assessed
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property
	settlement
	☑ No
	Yes. Give specific information
30.	Other amounts someone owes you
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else
	☑ No
	☐ Yes. Give specific information
31.	Interests in insurance policies
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance
	☑ No
	Yes. Name the insurance company of each policy and list its value
32.	Any interest in property that is due you from someone who has died
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.
	☑ No
	☐ Yes. Give specific information
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment
	Examples: Accidents, employment disputes, insurance claims, or rights to sue
	☑ No
	☐ Yes. Describe each claim
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims
	☑ No
	Yes. Describe each claim
35.	Any financial assets you did not already list
	. √1 No
	Yes. Give specific information
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?
	☑ No. Go to Part 6.
	☐ Yes. Go to line 38.

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45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Inf you own or have an interest in farmland, list it in Part 1.	nterest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	Yes. Go to line 47.	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	⊴ No	
	Yes. Give specific information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
	Control to Table of Fact Bart of His Face	
Pa	rt 8: List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$0.00
56.	Part 2: Total vehicles, line 5 \$0.00	
57.	Part 3: Total personal and household items, line 15 \$950.00	
58.	Part 4: Total financial assets, line 36 \$0.00	
59.	Part 5: Total business-related property, line 45 \$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52 \$0.00	
61.	Part 7: Total other property not listed, line 54 + \$0.00	
62.	Total personal property. Add lines 56 through 61	+ \$950.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62.	\$950.00

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Fill in this information to identify your case:							
Debtor 1	Myranda		Yoblick				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Sankruptcy Court for the	Eastern	District of Pennsylvania				
Case number				—			
(if known)				Check if this amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ide	ntify the Property You	ı Claim as Exempt						
1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any proper	rty you list on <i>Schedule</i> A	A/B that you claim as exe	mpt,	fill in the information below.				
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption			
	Brief Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.		\$300.00	⊴	\$300.00	_11 U.S.C. § 522(d)(3)			
	Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit				
3.	(Subject to adju	istment on 4/01/25 and eve		ses fil	ed on or after the date of adjustment.) 15 days before you filed this case?				

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_ Case number (if known) _

Debtor 1 Myranda

Yoblick

First Name Middle Name Last Name

Part 2: Ado	litional Page				
	on of the property and ule A/B that lists this	Current value of the portion you own Copy the value from Schedule A/B		nount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Brief description:	Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$300.00	√ 1	\$300.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	11 0.0.0. 3 022(0)(0)
Brief description:	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$150.00	<u> </u>		444400000000000000000000000000000000000
Line from Schedule A/B:	11			\$150.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description:	Various used pieces of jewelry.	\$200.00	4	\$200.00	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	
Brief description:	Santander Checking account	\$0.00			
	Acct. No.: 5822			\$0.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	

Fill in this inform	nation to identify your o	ase:						
Debtor 1	Myranda		Yoblick			_		
	First Name	Middle Name	Last Name					
Debtor 2						_		
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for th	e: Eastern	Distri	ct of	Pennsylvania			
Case number ([if							
known)							u	Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Fill in this inform	mation to identify your case:		
Dahtar 1	Managada	Val. i'al.	
Debtor 1	Myranda First Name Middle Name	Yoblick Last Name	
	First Name i wildlie Name	Last Name	
Debtor 2	<u> </u>		
(Spouse, if filing) First Name Middle Name	Last Name	
United States	Bankruptcy Court for the: Eas	stern District of Pennsylvania	
Case number (if known)	-		☐ Check if this is an
(ii Kilowii)			amended filing
Official For	m 106F/F		
Schedu	ıle E/F: Creditors V	Vho Have Unsecured Claims	12/15
Re as complete	and accurate as nossible. Use Part 1 f	or creditors with PRIORITY claims and Part 2 for creditors with	NONPRIORITY claims. List the
•	<u>-</u>	eases that could result in a claim. Also list executory contracts	
Form 106Á/B) a	nd on Schedule G: Executory Contract	ts and Unexpired Leases (Official Form 106G). Do not include a	any creditors with partially secured
		ave Claims Secured by Property. If more space is needed, copy	
number the ent number (if knov		Continuation Page to this page. On the top of any additional p	pages, write your name and case
idiliber (ii kiiot			
Part 1:	List All of Your PRIORITY Unsecu	red Claims	
1. Do anv cr	editors have priority unsecured claims	against you?	
	o to Part 2.		
Yes.	5 15 1 411 2.		
Part 2:	List All of Your NONPRIORITY Uns	secured Claims	
3. Do any cr	editors have nonpriority unsecured cla	aims against you?	
☐ No. Yo	ou have nothing to report in this part. Subn	nit this form to the court with your other schedules.	
√ Yes			
4. List all of	your pappriority uncoured claims in t	the alphabetical order of the creditor who holds each claim. If a	a graditar has more than one
		tely for each claim. For each claim listed, identify what type of claim	
	· · · · · · · · · · · · · · · · · · ·	particular claim, list the other creditors in Part 3.If you have more the	•
claims fill o	out the Continuation Page of Part 2.		
			Total claim
4.1 Ass/ser		Last 4 digits of account number 0 0 1 2	¢11 129 00
Aes/eci	y Creditor's Name	Last 4 digits of account number 0 0 1 2	<u>\$11,128.00</u>
	,	When was the debt incurred? 11/1/1999	
Attn: Ba	ankruptcy		_
PO Box	2461	As of the date you file the plains is. Cheek all that one	de .
Number	Street	As of the date you file, the claim is: Check all that app	ory.
Harrisb	urg, PA 17105-2461	☐ Contingent	
City	State ZIP	Code Unliquidated Disputed	
Who incu	irred the debt? Check one.	☐ Disputed	
☑ Debto		Type of NONPRIORITY unsecured claim:	
Debto	•	✓ Student loans	
	r 1 and Debtor 2 only	Obligations arising out of a separation agreement or	divorce that you did not report as
	st one of the debtors and another	priority claims	too the scale to
=	k if this claim is for a community debt	Debts to pension or profit-sharing plans, and other si	imilar debts
	·	Other. Specify	
	im subject to offset?		
√ No			

☐ Yes

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Ра	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.2	Aes/ecmc	Last 4 digits of account number 0 0 1 1 \$9,739.00
	Nonpriority Creditor's Name	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? 11/1/1999
	• •	
	PO Box 2461	As of the date you file, the claim is: Check all that apply.
	Number Street	☐ Contingent
	Harrisburg, PA 17105-2461	Unliquidated
	City State ZIP Code	☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify
	☐ Yes	
4.3	Aes/ecmc	Last 4 digits of account number 0 0 1 4 \$9,322.00
	Nonpriority Creditor's Name	When was the debt incurred? 4/1/1999
	Attn: Bankruptcy	When was the debt incurred? 4/1/1999
	PO Box 2461	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Harrisburg, PA 17105-2461	Contingent
	City State ZIP Code	 □ Unliquidated □ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify

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Debtor 1 Yoblick Myranda _ Case number (if known) _ First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	- Continuation Page	
After	listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.	al claim
4.4	Aes/ecmc	Last 4 digits of account number 0 0 1 5	6,196.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 2/1/1999	
	PO Box 2461 Number Street Harrisburg, PA 17105-2461 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	- As of the date you file, the claim is: Check all that apply. □ Contingent - □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not repriority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	port as
4.5	Is the claim subject to offset? No Yes Aes/ecmc Nonpriority Creditor's Name		5,246.00
	Attn: Bankruptcy PO Box 2461 Number Street Harrisburg, PA 17105-2461 City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 ✓ Student loans □ Obligations arising out of a separation agreement or divorce that you did not repriority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify 	oort as

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Part 2: Your NONPRIORITY Unsecured Claims –	Continuation Page
After listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
American Education Services Nonpriority Creditor's Name Attn: Bankruptcy PO Box1200 N 7th St, 3rd FI Number Street Harrisburg, PA 17102 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 0 0 1 2 \$11,128.00 When was the debt incurred? 11/16/1999 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify
American Education Services Nonpriority Creditor's Name Attn: Bankruptcy PO Box1200 N 7th St, 3rd FI Number Street Harrisburg, PA 17102 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 0 0 1 1 1 \$9,739.00 When was the debt incurred? 11/22/1999 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify

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Г	Your NONPRIORITY Unsecured Claims –	Continuation Page
Afte	r listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.8	American Education Services	Last 4 digits of account number 0 0 1 4 \$9,322.00
	Nonpriority Creditor's Name	· ———
	Attn: Bankruptcy	When was the debt incurred? 4/15/1999
	PO Box1200 N 7th St, 3rd Fl	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Harrisburg, PA 17102	☐ Contingent
	City State ZIP Code	· ☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify
4.9	American Education Services	Last 4 digits of account number 0 0 1 5 \$6,196.00
	Nonpriority Creditor's Name	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? 2/10/1999
	PO Box1200 N 7th St, 3rd Fl	•
	Number Street	As of the date you file, the claim is: Check all that apply.
	Harrisburg, PA 17102	☐ Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	 □ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify

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Pa	Your NONPRIORITY Unsecured Claims —	Continuation Page
Afte	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.10	American Education Services	Last 4 digits of account number 0 0 1 3 \$5,246.00
	Nonpriority Creditor's Name	When was the debt incurred? 10/30/1997
	Attn: Bankruptcy	10/00/1001
	PO Box1200 N 7th St, 3rd Fl	As of the data was file the alaim in Obest all that and
	Number Street	As of the date you file, the claim is: Check all that apply.
	Harrisburg, PA 17102	Contingent
	City State ZIP Code	☐ Unliquidated☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify
4.11	Discover Financial	Last 4 digits of account number 5 1 9 6 \$979.00
	Nonpriority Creditor's Name	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? 12/1/2015
	2500 Lake Cook Rd	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Riverwoods, IL 60015-3851	☐ Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	 □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard

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Part 2:	Your NONPRIORITY Unsec							
4.40		r them beginnin	g with 4.4, followed by 4.5, and so fo	orth.	Total claim			
4.12 NAVY F	CU		Last 4 digits of account number	2 0 0 6	\$20,851.00			
Nonpriorit	ty Creditor's Name		When was the debt incurred?	11/1/2015				
Attn: B	ankruptcy			11/1/2013				
PO Box	3000			O				
Number	Street		As of the date you file, the claim is	s: Check all that apply.				
Merrifie	eld, VA 22119		☐ Contingent☐ Unliquidated					
City	State	ZIP Code	☐ Disputed					
Debto Debto At lea Chec Is the cla Yes 4.13 Navy Fo	Yes		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify UnknownLoanType Last 4 digits of account number 2 0 0 6 \$20,851.					
•	ty Creditor's Name		When was the debt incurred?	11/1/2015				
	ankruptcy							
PO Box			As of the date you file, the claim is	s: Check all that apply.				
Number	Street		☐ Contingent	,				
	eld, VA 22119		- Unliquidated					
City	State	ZIP Code	☐ Disputed					
Debto Debto At lea	•		Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separation priority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify CreditCard	ration agreement or divorce that	you did not report as			

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Debtor 1

Myranda

Document Yoblick

First Name

Middle Name Last Name Case number (if known) _

Part 4: Add the Amounts for Each Type of Unsecured Claim

		ts of certain types of unsecured claims. This information is s for each type of unsecured claim.	for st	atist	ical reporting purposes onl	y. 28 U.S.C. § 159.
					Total claim	
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00	
	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00	
	6e.	Total. Add lines 6a through 6d.	6e.	•	\$0.00	
					Total claim	
Total claims from Part 2	6f.	Student loans	6f.		\$83,262.00	
nom rant 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$42,681.00	
	6j.	Total. Add lines 6f through 6i.	6j.		\$125,943.00	

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Fill in this inform	ation to identify your		A		
Debtor 1	Myranda		Yoblick		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the	ne: Eastern	District o	Pennsylvania	
Case number					
(if known)					Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - 🗹 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or co	mpany with whom you have th	ne contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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			D	<u>ocument</u> Page	27 of 47	
Fill in	this inform	nation to identify yo	ur case:			
Deb	tor 1	Myranda		Yoblick		
		First Name	Middle Name	Last Name		
	tor 2					
(Spo	use, if filing)	First Name	Middle Name	Last Name		
Unit	ed States E	Bankruptcy Court fo	or the: Easter	District of Pe	nnsylvania	
	e number					☐ Check if this is an
(if kn	own)					amended filing
Offic	ial Forr	m 106H				
Scl	hedu	 le H: Yoi	ur Codebtor	'S		12/15
						urate as possible. If two married people are opy the Additional Page, fill it out, and number
		e boxes on the lef every question.	t. Attach the Additional I	Page to this page. On the to	op of any Additional F	Pages, write your name and case number (if
1.	Do you h ✓ No	ave any codebtor	s? (If you are filing a joint	case, do not list either spous	e as a codebtor.)	
	Yes					
2.	Within th	e last 8 vears, ha	ve vou lived in a commu	nity property state or territe	orv? (Community prop	erty states and territories include Arizona,
	California	, Idaho, Louisiana,		erto Rico, Texas, Washington		,
		to to line 3.			2	
	☐ Yes. L		rmer spouse, or legal equi	valent live with you at the tin	ie?	
			unity state or territory did y	ou live?	Fill in the	name and current address of that person.
			and the second of the second o			name and carroin againsts of that persons
	N	ame of your spous	e, former spouse, or legal	equivalent		
	N	umbor	Stroot			
	IN	umber	Street			
	C	ity	State	ZIP Code		
3.	In Colum	n 1. list all of you	r codebtors. Do not inclu	ide vour spouse as a code	otor if your spouse is	filing with you. List the person shown in line
O.	2 again a	s a codebtor only	if that person is a guara	ntor or cosigner. Make sur	e you have listed the	creditor on Schedule D (Official Form 106D),
		•	n 106E/F), or Schedule G	G (Official Form 106G). Use		le E/F, or Schedule G to fill out Column 2.
	Column 1	: Your codebtor				he creditor to whom you owe the debt
2.1					Check all sc	hedules that apply:
3.1	Name				Schedule	e D, line
	ranic				☐ Schedule	e E/F, line
	Number		Street			e G, line
	City		Chata	710		
-	City		State	ZIP	Code	
3.2					Cohedule	e D, line
	Name					·
	Number		Street			E/F, line
					Schedule	e G, line

State

ZIP Code

City

Fill in this inform	ation to identify yo	ur case:		
Debtor 1	Myranda		Yoblick	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	Check if this is:
United States E	Bankruptcy Court fo	or the: Eastern	District of Pennsylvania	An amended filingA supplement showing postpetition ch
Case number				13 income as of the following date:
(if known)				MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	Part 1: Describe Employn	nent		(,, ,		
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-fil	ing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☑ Not employed			☐ Employed ☐ Not employed	
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name					
	Occupation may include student or homemaker, if it applies.	Employer's address	Number	Street		Number Street	
				Sueel		- Sueet	
			City	Sta	ate ZIP Code	City Sta	ite ZIP Code
		How long employed there?			_		
	Part 2: Give Details Abou	t Monthly Income					
	Estimate monthly income as of unless you are separated.	the date you file this form. If y	you have nothii	ng to re	port for any line, write \$	60 in the space. Include	our non-filing spouse
	If you or your non-filing spouse habelow. If you need more space, at			rmation	for all employers for th	at person on the lines	
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly, c			2.	\$0.00		
3.	Estimate and list monthly overt	ime pay.		3. +	\$0.00	+	
4.	Calculate gross income. Add lin	e 2 + line 3.		4.	\$0.00		

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Debtor 1

 Myranda
 Yoblick
 Case number (if known) _

 First Name
 Middle Name
 Last Name

				For Debtor 1	For Debtor 2 or non-filing spouse	
	Cop	y line 4 here→	4.	\$0.00		
5.	List	all payroll deductions:				
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$0.00		
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00		
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$0.00		
	5e.	Insurance	5e.	\$0.00		
	5f.	Domestic support obligations	5f.	\$0.00		
	5g.	Union dues	5g.	\$0.00		
	5h.	Other deductions. Specify:	5h. +	\$0.00	+	
6.		I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00		
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		
8.	List	all other income regularly received:				
	8a.	Net income from rental property and from operating a business, profession, or farm				
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		
	8b.	Interest and dividends	8b.	\$0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive				
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$325.00		
	8d.	Unemployment compensation	8d.	\$0.00		
	8e.	Social Security	8e.	\$0.00		
	8f.	Other government assistance that you regularly receive				
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	04	\$0.00		
		Specify:	8f.	\$0.00		
	8g.	Pension or retirement income	8g.	· · · · · · · · · · · · · · · · · · ·		
	8h.	Other monthly income. Specify:	8h. +	\$0.00	+	
9.	Add	I all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$325.00		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$325.00	+	\$325.00
11.	Stat	e all other regular contributions to the expenses that you list in Schedu	ıle J.			
	frier	ude contributions from an unmarried partner, members of your household, youds or relatives.	·	•	,	
		not include any amounts already included in lines 2-10 or amounts that are no	ot avail	able to pay expenses I		. 60.00
	Spe	cify:			11.	+\$0.00

Entered 03/31/25 17:04:46 Desc Main Case 25-11268 Filed 03/31/25 Doc 1 Page 30 of 47 Document Debtor 1 Yoblick Myranda Case number (if known) _ First Name Middle Name Last Name 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$325.00 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ✓ No. Yes. Explain:

Official Form 106l Schedule I: Your Income page 3

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tion chapter 13
te:
12/15
ormation. If more
wer every question.
dependent live
ou?
ou? o. ☑ Yes.
ou? o. ☑ Yes. o. ☑ Yes.
ou? o. ✓ Yes. o. ✓ Yes. o. ✓ Yes.
ou? o.
ou? o.
ou? o.
ou? o. ✓ Yes. o. ✓ Yes. o. ✓ Yes. o. ✓ Yes. o. ✓ Yes.
ou? o. ✓ Yes. o. ✓ Yes. o. ✓ Yes. o. ✓ Yes. o. ✓ Yes.
Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes.
_

\$0.00

\$0.00

\$0.00

\$0.00

4a.

4b.

4c.

4d.

If not included in line 4:

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4a. Real estate taxes

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Debtor 1 Myranda **Yoblick** Case number (if known) First Name

Last Name

Middle Name

	Yo	ur expenses
. Additional mortgage payments for your residence, such as home equity loans	5	\$0.00
. Utilities:		
6a. Electricity, heat, natural gas	6a	\$0.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$0.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$200.00
Childcare and children's education costs	8.	\$0.00
. Clothing, laundry, and dry cleaning	9.	\$50.00
O. Personal care products and services	10.	\$75.00
	10	\$0.00
1. Medical and dental expenses	· · · · · · · · · · · · · · · · · · ·	ψυ.υυ
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$0.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
4. Charitable contributions and religious donations	14.	\$0.00
5. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		40.00
15a. Life insurance		\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b.	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:		\$0.00
3. Your payments of alimony, maintenance, and support that you did not report as deducted		
from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	\$0.00
9. Other payments you make to support others who do not live with you.		* 0.00
Specify:	19. <u> </u>	\$0.00
O. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a	
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Yoblick Debtor 1 Myranda Case number (if known) _ First Name Last Name Middle Name 21. Other. Specify: 21. +____ \$0.00 22. Calculate your monthly expenses. 22a. \$325.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$325.00 23. Calculate your monthly net income. 23a. \$325.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$325.00 23c. Subtract your monthly expenses from your monthly income. \$0.00 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. Yes.

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Fill in this information	to identify your case			
Debtor 1	Myranda		Yoblick	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bankr	uptcy Court for the:	Easte	rn District of Pennsylvania	<u> </u>
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

new Summary and check the box at the top of this page.	iai ioinis, you must iiii out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$950.00
1c. Copy line 63, Total of all property on Schedule A/B	\$950.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$125,943.00
Your total liabilities	\$125,943.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$325.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$325.00

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Debtor 1 Myranda Yoblick Case number (if known) Last Name

Part	4: Answer These Questions for Administrative and Statistical Records					
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes					
4	What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.					
	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$325.00					
9. C c	py the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim				
	From Part 4 on Schedule E/F, copy the following:					
ę	a. Domestic support obligations (Copy line 6a.)	\$0.00				
9	b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00				
ę	c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00				
ę	d. Student loans. (Copy line 6f.)	\$83,262.00				
Ş	e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00				
ę	f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00				
ę	g. Total . Add lines 9a through 9f.	\$83,262.00				

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Fill in this information	to identify your case	:		
Debtor 1	Myranda		Yoblick	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:	Easte	ern District of Pennsylva	nia
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
ou pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
der penalty of perjury, I declare that I have read	the summary and schedules filed with this declaration and that they are true and correct.
	-
.	
/s/ Myranda Yoblick Myranda Yoblick, Debtor 1	
/s/ Myranda Yoblick Myranda Yoblick, Debtor 1 Date 03/31/2025	

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			Document	Paye 37 01 47
Fill in this information	n to identify your case	:		
Debtor 1	Myranda		Yoblick	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	East	ern District of P	ennsylvania
Case number				
(if known)				
Off: -: -1 E	407			
Official Form	1 107			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1. What is your current marital status?				
☐ Married				
☑ Not married				
2. During the last 3 years, have you lived ar	nywhere other than where y	ou live now?		
☑ No				
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	de where you live now.		
. Within the last 8 years, did you ever live verritories include Arizona, California, Idaho,				
☑ No				
		4.0.01.1)		
☐ Yes. Make sure you fill out <i>Schedule H</i>	: Your Codebtors (Official Fo	orm 106H).		
Yes. Make sure you fill out Schedule H	: Your Codebtors (Official Fo	orm 106H).		
_	·	orm 106H).		
art 2: Explain the Sources of Your I Did you have any income from employments.	Income ent or from operating a bus	siness during this year or t		/ears?
Explain the Sources of Your I Did you have any income from employmerill in the total amount of income you receive	Income ent or from operating a bused from all jobs and all busin	siness during this year or t esses, including part-time a	activities.	years?
Explain the Sources of Your I Did you have any income from employment of income you receive	Income ent or from operating a bused from all jobs and all busin	siness during this year or t esses, including part-time a	activities.	years?
Explain the Sources of Your I Did you have any income from employmers I in the total amount of income you receive If you are filing a joint case and you have income. No	Income ent or from operating a bused from all jobs and all busin	siness during this year or t esses, including part-time a	activities.	/ears?
Explain the Sources of Your I Did you have any income from employment of income you receive you are filing a joint case and you have income you have any income you have income you have any you hav	Income ent or from operating a bused from all jobs and all busin	siness during this year or t esses, including part-time a	activities.	/ears?
Explain the Sources of Your I Did you have any income from employmers I in the total amount of income you receive If you are filing a joint case and you have income. No	ent or from operating a bused from all jobs and all busingome that you receive togeth	siness during this year or t esses, including part-time a	activities. ebtor 1.	/ears? Gross Income
Explain the Sources of Your I Did you have any income from employment in the total amount of income you receive you are filing a joint case and you have income No	ent or from operating a bused from all jobs and all busing that you receive togeth	siness during this year or t lesses, including part-time a ler, list it only once under D	pettor 2	
art 2: Explain the Sources of Your I 1. Did you have any income from employmerill in the total amount of income you receive fryou are filing a joint case and you have income No	ent or from operating a bused from all jobs and all businsome that you receive togeth Debtor 1 Sources of income	Siness during this year or the sesses, including part-time and an er, list it only once under D Gross Income (before deductions and	Debtor 2 Sources of income	Gross Income (before deductions and exclusions)

	Case	25-11268	Doc 1	Filed 03/31/2 Document	25 Entered 03 Page 38 of 4	3/31/25 17:04:46 Desc Main 7
Debtor 1	Myrand	la		Yoblick	r age oo or 4	Case number (if known)
	First Nam	e Middle	Name	Last Name		
	calendar yea	r: per 31, _2024)		ages, commissions, nuses, tips	\$16,282.00	☐ Wages, commissions, bonuses, tips
(January	i to Decemi	YYYY YYYY	√ Ope	erating a business	\$0.00	Operating a business
	-	before that:		ages, commissions, nuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips
(January	T to Decemb	YYYY YYYY	√ Оре	erating a business	\$12,687.00	Operating a business
public bene filing a joint No Yes. F	efit payments case and yo	; pensions; rental ir u have income tha ails.	ncome; int	erest; dividends; mone	ey collected from lawsu y once under Debtor 1.	ny; child support; Social Security, unemployment, and other its; royalties; and gambling and lottery winnings. If you are
		-			24 42.03	
6. Are eithe	er Debtor 1's	or Debtor 2's debts	primarily	consumer debts?		
☐ No.				arily consumer debts. mily, or household purp		lefined in 11 U.S.C. § 101(8) as "incurred by
	During the 9	90 days before you	filed for b	ankruptcy, did you pay	any creditor a total of	\$7,575* or more?
	☐ No. Go t	o line 7.				
	р	aid that creditor. Do	not inclu		stic support obligations	or more payments and the total amount you s, such as child support and alimony. Also, do
	* Subject to	adjustment on 4/0	1/25 and 6	every 3 years after that	for cases filed on or at	fter the date of adjustment.
√ Yes.	Debtor 1 or	Debtor 2 or both h	nave prima	arily consumer debts.		
			_	-	any creditor a total of	\$600 or more?
	☑ No. Go t	o line 7.				
	ir		r domestic	support obligations, s		otal amount you paid that creditor. Do not not alimony. Also, do not include payments to
Insiders inc you are an operate as	clude your rel officer, direct a sole propri	atives; any general tor, person in contro etor. 11 U.S.C. § 10	partners; ol, or own	relatives of any general relatives of any general relatives of any general relatives.	al partners; partnership neir voting securities; ar	nyone who was an insider? so of which you are a general partner; corporations of which and any managing agent, including one for a business you such as child support and alimony.
Yes. L	ist all payme	nts to an insider.				
Include pay	ments on de	bts guaranteed or o	cosigned b	oy an insider.	ents or transfer any pro	operty on account of a debt that benefited an insider?
☐ Yes. L	ist all payme	nts that benefited a	ın ınsıder.			

Page 39 of 47 Document Debtor 1 Myranda Yoblick Case number (if known). First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and **✓** No Yes. Fill in the details. 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **✓** No ☐ Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **√** No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No ☐ Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution. List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **√**No Yes. Fill in the details.

Case 25-11268

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Debtor 1	Myranda		Yoblick		Case number (if kno	wn)
	First Name Middle	Name	Last Name	_		
Part 7: List	t Certain Payments or T	ransfers				
about seeking Include any a No	year before you filed for ban ng bankruptcy or preparing a attorneys, bankruptcy petition I in the details.	bankruptcy	petition?		pay or transfer any property equired in your bankruptcy.	to anyone you consulted
Cibik La		Description	n and value of any prop	perty transferred	Date payment or transfer was made	Amount of payment
Person Who	,	Attorney's	Fee; Attorney's Co	sts		
1500 Wa	Inut Street Suite 900				03/31/2025	\$1,800.00
	Street				03/31/2025	\$575.00
					0.70 1.72020	
Philadel	phia, PA 19102	-				
City	State ZIP Code					
	biklaw.com	_				
Email or web	osite address					
Person Who	Made the Payment, if Not You	_				
help you dead Do not include of No Yes. Fill 18. Within 2 yordinary could include both Do not include of No Yes. Fill 19. Within 10 (These are of No Yes. Fill 19. Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes	I with your creditors or to me le any payment or transfer the le any payment or transfer the lin the details. Years before you filed for bases of your business or finate outright transfers and transfered le gifts and transfers that you lin the details.	nkruptcy, did ncial affairs? rs made as s have already	is to your creditors? on line 16. I you sell, trade, or other ecurity (such as the gray) listed on this statement	erwise transfer any anting of a security i at.	property to anyone, other the nterest or mortgage on your present or mortgage on your present of the trust or similar device of	nan property transferred in the property). which you are a beneficiary?
or transferre Include chec	d?	or other fina	ncial accounts; certifica		eld in your name, or for your	r benefit, closed, sold, moved, okerage houses, pension
✓ No						
Yes. Fill	in the details.					

	Case 25-1	11268 Doc 1		entered 03/31/25 17:04:46 Desc Main ge 41 of 47
ebtor 1	Myranda		Yoblick	Case number (if known)
	First Name	Middle Name	Last Name	
21. Do you ı valuables?	now have, or did yo	ou have within 1 year b	pefore you filed for bankrupto	cy, any safe deposit box or other depository for securities, cash, or othe
✓No				
☐ Yes. Fi	ll in the details.			
22. Have yo	u stored property i	n a storage unit or pla	ce other than your home with	hin 1 year before you filed for bankruptcy?
√ No				
☐ Yes. Fi	Il in the details.			
Part 9: Ide	entify Property \	You Hold or Contro	I for Someone Else	
	<u> </u>			operty you borrowed from, are storing for, or hold in trust for someone.
√ No	iola of control any	property that comes	o oloo omio. molado dily pi	operty you believed from, are closing to , or flow in traction confidence
_	Il in the details.			
	ii iii dadailo.			
2 ant 10	ius Dataile Aba	ut Emilianum antal l	- Farma aki au	
Part 10: G	IVE DETAILS ADOI	ut Environmental I	nformation	
For the purp	oose of Part 10, the	following definitions	apply:	
substan	ces, wastes, or mat			erning pollution, contamination, releases of hazardous or toxic ter, or other medium, including statutes or regulations controlling the
■ Site me or utilize	ans any location, fa e it, including dispos	cility, or property as de sal sites.	fined under any environmenta	al law, whether you now own, operate, or utilize it or used to own, operate,
	ous material means t, contaminant, or s		ental law defines as a hazardo	ous waste, hazardous substance, toxic substance, hazardous material,
Report all n	otices, releases, ar	nd proceedings that yo	ou know about, regardless of	when they occurred.
24. Has any	governmental unit	notified you that you	may be liable or potentially li	iable under or in violation of an environmental law?
√ No				
☐ Yes. Fi	ll in the details.			
25. Have yo	u notified any gove	ernmental unit of any r	elease of hazardous material	1?
√ No				
☐ Yes. Fi	ll in the details.			
26. Have yo	u been a party in a	ny judicial or administ	rative proceeding under any	environmental law? Include settlements and orders.
√ No				
Yes. Fi	II in the details.			

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Debtor 1	Myranda	Yoblick	J	Case number (if k	(nown)
	First Name Mid	ddle Name Last Name		·	
Part 11: G	Give Details About You	r Business or Connections to A	Any Business		
07 14/14/		. h l		-11	
_	•	bankruptcy, did you own a business	•	_	ny business?
□ A	sole proprietor or self-empl	loyed in a trade, profession, or other a	activity, either full-time	or part-time	
□ A	member of a limited liability	y company (LLC) or limited liability pa	rtnership (LLP)		
□ A	partner in a partnership				
☐ Ar	n officer, director, or manag	ging executive of a corporation			
☐ Ar	n owner of at least 5% of th	ne voting or equity securities of a corp	oration		
☐ No. No	one of the above applies. G	to to Part 12.			
√ Yes. C	heck all that apply above a	nd fill in the details below for each bu	siness.		
Levent	First	Describe the nature of the bu	siness	Employer Identification	
Name	1 1101	— Clerical		Do not include Social S	ecurity number or ITIN.
				EIN:	
		Name of accountant on booking		Dates business existed	
1824 Me	eribrock Road Street	Name of accountant or book	eeper	Dates business existed	
Number	Ollect	None		From <u>1/2023</u> T	o <u>12/2023</u>
	Iphia, PA 19151				
City	State ZIP Code	9			
	2 years before you filed for or other parties.	bankruptcy, did you give a financial	statement to anyone	about your business? Ind	clude all financial institutions,
√ No					
Yes. Fi	ill in the details below.				

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Debtor 1	Myranda		Yoblick	J	Case number (if known)	
	First Name	Middle Name	Last Name			

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I decay and correct. I understand that making a false statement, concealing property, or obtaining metankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or bo	oney or property by fraud in connection with a
X /s/ Myranda Yoblick Signature of Myranda Yoblick, Debtor 1	
Date <u>03/31/2025</u>	
Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for	or Bankruptcy (Official Form 107)?
☑No	
☐Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy for	orms?
☑No	
☐ Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	Myranda		Yoblick	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Easte	rn District of Pennsylva	ania
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims
 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.
 Identify the creditor and the property that is collateral
 What do you intend to do with the property that secures Did you claim the property as a debt?

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Debtor 1	Myranda		Yoblick	Case number (if known)
	First Name	Middle Name	Last Name	<u> </u>
Part 2: Lis	t Your Unexpired	Personal Property	Leases	
				ontracts and Unexpired Leases (Official Form 106G), fill in the
information b	elow. Do not list rea	l estate leases. Unexp		still in effect; the lease period has not yet ended. You may assume an
Describe	your unexpired pers	sonal property leases		Will the lease be assumed?
Lessor's na	ame:			☐ No
Description property:	n of leased			☐ Yes
Lessor's na	ame:			☐ No
Description property:	n of leased			☐ Yes
Lessor's na	ame:			□ No
Description property:	n of leased			☐ Yes
Lessor's na	ame:			☐ No
Description property:	n of leased			☐ Yes
Lessor's na	ame:			☐ No
Description property:	n of leased			☐ Yes
Lessor's na	ame:			☐ No
Description property:	n of leased			☐ Yes
Lessor's na	ame:			□ No
Description property:	n of leased			Yes
Part 3: Sig	ın Below			
	alty of perjury, I decla at is subject to an u		d my intention about any prope	erty of my estate that secures a debt and any personal
X /s/ My	randa Yoblick			
•	re of Debtor 1		_	

Date 03/31/2025

MM/ DD/ YYYY

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	١	Yoblick, Myranda							
						Case No.			
Debt	or					Chapter	7		
			DISCLOSURE O	F COMPENS	ATION OF AT	TTORNEY F	OR DEBT	OR	
1.	con	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For	legal services, I h	nave agreed to accept					\$1,800.00	<u>)</u>
	Pric	or to the filing of th	nis statement I have re	ceived				\$1,800.00	<u>)</u>
	Bala	ance Due					·····	\$0.00	<u>)</u>
2.	The	e source of the cor	mpensation paid to me	e was:					
	√	Debtor	Other (specify)						
3.	The	The source of compensation to be paid to me is:							
	√	Debtor	Other (specify)						
4.	_	I have not agreed firm.	d to share the above-o	disclosed compen	sation with any c	other person ur	nless they are	e members and assoc	iates of my
		☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.							
5.	In r	eturn for the abov	e-disclosed fee, I have	e agreed to rende	r legal service fo	or all aspects of	the bankrup	otcy case, including:	
	a.	Analysis of the obankruptcy;	debtor' s financial situ	ation, and renderi	ng advice to the	debtor in deter	mining whetl	her to file a petition in	
	b.	Preparation and	d filing of any petition,	schedules, staten	nents of affairs a	nd plan which i	may be requ	ired;	
	C.	Representation	of the debtor at the m	eeting of creditors	s and confirmation	on hearing, and	any adjourn	ned hearings thereof;	
6.	Ву	agreement with th	ne debtor(s), the above	e-disclosed fee do	es not include th	ne following ser	vices:		

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/31/2025 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm